bp



May 27, 2011

BP Products North America Inc. 2815 Indianapolis Blvd. P.O. Box 710 Whiting, IN 46394-0710 USA

CERTIFIED MAIL# RETURN RECEIPT REQUESTED

Indiana Department of Environmental Management OWO Data Management Section 100 North Senate Avenue Indianapolis, IN 46206

Re: DMR Report Outfalls 002, 003, 004, & 005

NPDES Permit No. 0000108

Please find enclosed the effluent quality data and Discharge Monitoring Report forms from the BP Products North America Inc. - Whiting Business Unit for the month of April 2011. The report identifies exceedances of NPDES permit limits due to the unexpected loss of one of two clarifiers and significant rain events which hit the region during April. The notification reports concerning this upset event were submitted to IDEM as required on April 25, 26, 28, 29, May 2, and 4.

On April 18th, foaming was noticed on the surface of the clarifier. Upon further inspection, it was observed that the center well had dropped into the clarifier and was hung up on the suction rake below. This made the clarifier inoperable. Operations immediately and safely brought the clarifier out of service and began working to maximize flow through the remaining clarifier. The remaining operating clarifier processed high volumes of water as containment was limited due to periodic rain events. In order to minimize any adverse impact, the refinery enacted watershed to reduce flow to the wastewater treatment plant (WWTP). Vacuum trucks were staged at the WWTP 24hrs/d. Staff was increased to monitor status of the clarifier, and water was impounded in the equalization and storm surge tanks to maximum capacity. Despite taking measures to mitigate any impact, including our efforts to significantly reduce flow to the lakefront, carry-over from the clarifier bed occurred, which resulted in daily max TSS exceedences on April 21, 22, 23, 24, 25, 26, 27, and 28. Samples collected on April 29, 30, and May 1 indicated that TSS had returned to normal levels and we were operating within our NPDES permit limit. This event also resulted in a monthly average TSS exceedence. Samples collected on April 27 resulted in a daily max Oil & Grease exceedence but on April 28 samples indicated that Oil & Grease had returned to normal levels and we were operating within our NPDES permit limit. Discoloration was observed at Outfall 005 intermittently from April 28 through May 2. We exceeded our daily max for BOD on April 27 but were below our permit limit on April 28.

The refinery implemented Incident Command on April 28 through May 3 to provide focus on managing the loss of clarifier event with minimal environmental impact. The refinery implemented full watershed actions, including reducing production rates, to reduce flow to the

wastewater treatment plant. Response contractors and equipment were deployed at the refinery. Due to the hydraulic loading as well as

oil and solids due to this event, the biomass at the wastewater treatment plant was significantly impacted, prolonging recovery.

The Whiting Business Unit is conducting an incident investigation and root cause failure analysis with the key objective of preventing such events from occurring.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

If you have any questions or need any additional information, please contact Valorie L. Moore at (219) 473-2095.

Sincerely,

Nick Spencer
Business Unit Leader
Whiting Business Unit

Cc: N. Ream, Merrillville, IN

Attachments: DMR Report

PERMITTEE NAME/ADDRES N NAME BP PRODUCTS NORTH AMERICA INC.

IN 46394

ATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM	(NPDES)
DISCHARGE MONITORING REPORT (DMR)	(

Revised:	I	000 <i>P</i>	0108	002 A				
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Form Approved OMB No. 2040-004 Approval Expires 05-31-98

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For any questions call Gary Starks at 317-232-8694

*** Mark box if NO DISCHARGE

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	QUANTI	TY OR LOADIN	I G	QUA	LITY OR CONC					Sample
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PERMIT REQUIREMENT	Report	Report						0	Daily	TOTALZ
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I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or prisonment for knowing violations

WHITING REFINERY - MAIL CODE 062

2815 INDIANAPOLIS BLVD

FACILITY BP PRODUCTS NORTH AMERICA INC

WHITING

LOCATION WHITING

NAME AND TITLE OF PRINCIPAL AUTHORIZE	AL EXECUTIVE OFFICER OR ED AGENT	TELEPHONE		DATE	
Nick Spencer Business Unit Leader	N.00	219 473-3179	.5	26	11
TYPED OR PRINTED	STATURE	AREA CODE AND NO.	МО	DAY	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

ADDRESS

(Reference all attachments here)

PERMITTEE	NAME/ADDRES		NATION	AL PO	LLUTANT	DISCHA	ARGE ELI	MINATION SYS	TEM (NPDES) Form	Approved			
NAME	BP PRODUCTS NO	ORTH AMERICA IN	iC.		DISCHARO	SE MON	ITORING	REPORT (DMR)		OMB	No. 2040-0			
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FACILITY BP PRODUCTS NORTH AMERICA INC			C				ORING PE		_	For	any questi	ons ca	ll Gary Starks at	317-232-8694
LOCATION		IN			MO DAY	1	,	MO DAY YEAR	*** N	fark box if N				***
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NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR
AUTHORIZED AGENT

Nick Spencer
Business Unit Leader

TYPED OR PRINTED

SECULATURE

TELEPHONE

DATE

219 473-3179 5 34 //

AREA CODE AND NO. MO DAY YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

PERMITTEE NAME/ADDRES NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) Form Approved DISCHARGE MONITORING REPORT (DMR) NAME BP PRODUCTS NORTH AMERICA INC. OMB No. 2040-004 Approval Expires 05-31-98 WHITING REFINERY - MAIL CODE 062 **ADDRESS** Revised: IN0000108 003 A 2815 INDIANAPOLIS BLVD PERMIT NUMBER PERMITTED FEATURE WHITING IN 46394 MONITORING PERIOD FACILITY BP PRODUCTS NORTH AMERICA INC For any questions call Gary Starks at 317-232-8694 MO DAY YEAR MO DAY YEAR LOCATION WHITING *** Mark box if NO DISCHARGE 04/01/11 ATTN: FROM 04/30/11 DANIEL SAJKOWSKI, PLT MANAGER TO NOTE: Read Instructions before completing this form **PARAMETER QUANTITY OR LOADING QUALITY OR CONCENTRATION** NO. Frequency Sample Average Maximum Units Minimum Maximum EX of Analysis Average Units Type Нa SAMPLE ***** ***** ***** SU MEASUREMENT 7.4 7.7 Weekly GRAB 00400 PERMIT 6 9 Weekly GRAB Effluent Gross REQUIREMENT DAILY MN DAILY MX Oil and grease, hexane SAMPLE **** ***** **** mg/L MEASUREMENT extr method £1.1 2.7 GRAB Weeklv 00552 PERMIT 15 Report Weekly GRAB REQUIREMENT **Effluent Gross** 0 MO AVG DAILY MX Carbon, tot organic (TOC) SAMPLE ***** ***** ***** mg/L MEASUREMENT 26 36 Weekly GRAB 00680 PERMIT

Mgal/d

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Report

DAILY MX

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

REQUIREMENT

SAMPLE

MEASUREMENT

PERMIT

REQUIREMENT

Effluent Gross

50050

Effluent Gross

treatment plant

Flow, in conduit or thru

NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR
AUTHORIZED AGENT

Nick Spencer
Business Unit Leader
TYPED OR PRINTED

SIGNATURE

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Report

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DAILY MX

(Reference all attachments here)

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NAME AND TITLE OF PRINCIPAL AUTHORIZED	TELEPHONE	DATE			
Nick Spencer Business Unit Leader	N. D.S.	219 473-3179	4	210	11
TYPED OR PRINTED	SIGNATURE	AREA CODE AND NO.	MO	DAY	YEAR
s here)					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

(Reference all attachments here)

DISCHARGE MONITORING REPORT (DMR) NAME BP PRODUCTS NORTH AMERICA INC. OMB No. 2040-004 **ADDRESS** WHITING REFINERY - MAIL CODE 062 Approval Expires 05-31-98 Revised: IN0000108 005 A 2815 INDIANAPOLIS BLVD PERMIT NUMBER PERMITTED FEATURE WHITING IN 46394 * I N O O O O 1 O 8 O O 5 A 4 2 O 1 1 * MONITORING PERIOD FACILITY BP PRODUCTS NORTH AMERICA INC For any questions call Gary Starks at 317-232-8694 MO DAY YEAR MO DAY YEAR **LOCATION WHITING** *** Mark box if NO DISCHARGE ATTN: DANIEL SAJKOWSKI, PLT MANAGER FROM 04/01/11 04/30/11 TO NOTE: Read Instructions before completing this form **PARAMETER QUANTITY OR LOADING QUALITY OR CONCENTRATION** NO. Frequency Sample Average Maximum Units Minimum of Analysis Average Maximum EX Type Units BOD, 5-day, 20 deg. C SAMPLE lb/d ***** mg/L Weeklv COMP MEASUREMENT 3290 14116 23.0 93.0 24 00310 PERMIT 4161 8164 Report Report Weekly COMP24 **Effluent Gross** REQUIREMENT MOAVG DAILY MX MO AVG DAILY MX Hq SAMPLE ***** ***** ***** SU MEASUREMENT Three GRAB 6.9 7.3 00400 Per Wee PERMIT 9 Three Per GRAB **Effluent Gross** REQUIREMENT 0 DAILY MN Week DAILY MX Solids, total suspended SAMPLE lb/d ***** Twice COMP mg/L MEASUREMENT 14174 66362 103.2 437.2 Every Week 24 00530 PERMIT 4925 7723 Report Report Twice Every COMP24 **Effluent Gross** REQUIREMENT MO AVG DAILY MX MO AVG Week DAILY MX Oil and grease, hexane SAMPLE lb/d ***** mg/L MEASUREMENT Weeklv extr method GRAB 3263 782 5.2* 21.5 00552 PERMIT 1368 2600 Report Report Weekly GRAB **Effluent Gross** REQUIREMENT MO AVG DAILY MX MO AVG DAILY MX Nitrogen, ammonia total SAMPLE lb/d ***** mg/L Five Per COMP MEASUREMENT (as N) **L**40 453 40.28 3.27 Week 24 00610 PERMIT 1584 3572 Report Report Five Per COMP24 0 **Effluent Gross** REQUIREMENT MO AVG DAILY MX MO AVG Week DAILY MX Phosphorus, total (as P) SAMPLE lb/d ***** mg/L MEASUREMENT 13 Weekly COMP 6 0.04 0.10 00665 PERMIT Report Report Report Weekly COMP24 **Effluent Gross** REQUIREMENT 0 MO AVG DAILY MX MO AVG DAILY MX Sulfide, total (as S) SAMPLE lb/d ***** Weeklv COMP **L**1.4 mg/L MEASUREMENT **∠**1.6 Z0.01 ∠0.01 24 00745 PERMIT 23.1 51.4 Report Report Weekly COMP24 Effluent Gross REQUIREMENT MO AVG DAILY MX 0 MO AVG DAILY MX I certify, under penalty of law, that this document and all attachments were prepared under my NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR direction or supervision in accordance with a system designed to assure that qualified personnel TELEPHONE DATE properly gather and evaluate the information submitted. Based on my inquiry of the persons who AUTHORIZED AGENT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

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there are significant penalties for submitting false information, including the possibility of fine or

(Reference all attachments here)

* Means "Not Quantifiable"

PERMITTEE NAME/ADDRES

INDUSTRIAL MAJOR LAKE COUNTY

20

DAY

219 473-3179

AREA CODE AND NO.

SIGNATURE

Form Approved

EPA FORM 3320-1(03-99) Revised by Indiana (June 2007) (Replaces EPA FORM T-40 WHICH MAY NOT BE USED - Mail Forms To IDEM (No Photo Corac clarifier and was hung up on the suction rake below. Lake Major IN0000108005A4/30/2011 - Page 1 of 2 This made the clarifier inoperable. The WWTP operated with remaining clarifier until repairs were complete and clarifier returned to service on April 30.

Business Unit Leader

TYPED OR PRINTED

Nick Spencer

Approval Expires 05-31-98 ADDRESS WHITING REFINERY - MAIL CODE 062 Revised: IN0000108 005 A 2815 INDIANAPOLIS BLVD PERMIT NUMBER PERMITTED FEATURE WHITING IN 46394 0 0 0 0 1 0 8 0 0 5 A 4 2 0 1 1 * MONITORING PERIOD FACILITY BP PRODUCTS NORTH AMERICA INC For any questions call Gary Starks at 317-232-8694 MO DAY YEAR MO DAY YEAR LOCATION WHITING *** Mark box if NO DISCHARGE *** 04/01/11 FROM ATTN: DANIEL SAJKOWSKI, PLT MANAGER 04/30/11 TO NOTE: Read Instructions before completing this form **PARAMETER QUANTITY OR LOADING OUALITY OR CONCENTRATION** NO. Frequency Sample Average Maximum Units Minimum Average EX of Analysis Maximum Units Type Chromium, total (as Cr) SAMPLE lb/d ***** COMP Weekly mg/L MEASUREMENT $\angle 1.5$ ∠ 0.01 0.01 1.6 24 01034 PERMIT 23.9 68.53 Report Report Weekly COMP24 Effluent Gross REQUIREMENT MO AVG DAILY MX MO AVG DAILY MX Vanadium, total SAMPLE lb/d **** mg/L COMP Monthly MEASUREMENT recoverable 15 25 0.10 0.19 01128 A 1 PERMIT Report Report Report Report Monthly COMP24 Effluent Gross 0 REQUIREMENT MOAVG DAILY MX MO AVG DAILY MX Chromium, hexavalent SAMPLE lb/d ***** ∠0.005 40.8 20.8 **1.0.005** mg/L MEASUREMENT dissolved (as Cr) Weeklv GRAB 01220 1 PERMIT 2.01 4.48 Report Report Weekly GRAB REQUIREMENT Effluent Gross O MO AVG DAILY MX MO AVG DAILY MX Phenolics, total SAMPLE lb/d **** mg/L Weeklv COMP **∠** 1.45 ∠ 0.01 MEASUREMENT **L1.62** $\angle 0.01$ recoverable 24 32730 0 0 PERMIT 20.33 73.01 Report Weekly Report COMP24 Effluent Gross REQUIREMENT MO AVG DAILY MX 0 MO AVG DAILY MX Flow, in conduit or thru SAMPLE Mgal/d ***** ***** **** MEASUREMENT TOTALZ treatment plant Daily 17.0 20.7 50050 1 PERMIT Report Report Section 1 Daily TOTALZ Effluent Gross REQUIREMENT MO AVG DAILY MX O Chemical Oxygen SAMPLE lb/d ***** mg/L Weekly COMP Demand (COD) MEASUREMENT 14657 40666 95 265 24 81017 PERMIT 30323 58427 Report Report Weekly COMP24 Effluent Gross REQUIREMENT MO AVG DAILY MX MO AVG DAILY MX Flow, total SAMPLE **** Mgal/ ***** ***** ***** MEASUREMENT Monthly RCOTOT 509.80 mo 82220 PERMIT. Report Mouthly RCOTOT **Effluent Gross** REQUIREMENT 0 MO TOTAL I certify, under penalty of law, that this document and all attachments were prepared under my NAME AND TITLE OF PRINCIPAL EXECUTIVE OFFICER OR TELEPHONE direction or supervision in accordance with a system designed to assure that qualified personnel DATE

Nick Spencer

Business Unit Leader

TYPED OR PRINTED

AUTHORIZED AGENT

SIGNATURE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

COMMENTS AND EXPLANATION OF ANY VIOLATIONS

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submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that

PERMITTEE NAME/ADDRES

BP PRODUCTS NORTH AMERICA INC.

NAME

(Reference all attachments here)

24

DAY

219 473-3179

AREA CODE AND NO.

Form Approved

OMB No. 2040-004

2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO	IN000010	8 OUTF	ALL 002	Apr-11	APRIL	COOLING W	ATER EFF	LUENT					
PARAMETER CODE SAMPLE TYPE	FLOW 50050	IN-TEMP 00011	OUT-TEMP 00011	HEAT 00179	pH 00400	OUT-OIL 00552	IN-TOC 00680	OUT-TOC 00680	DELTA-TOC 00680	RESI 500		IN-TEMP 00011	OUT-TEMP 00011
PERMIT ACTUAL	CONT	CONT	CONT	CONT CONT	GRAB GRAB	GRAB GRAB	GRAB GRAB	GRAB GRAB	GRAB GRAB	GR GR		CONT CONT	CONT CONT
FREQUENCY													
PERMIT ACTUAL	CONT	5/7 CONT	5/7 CONT	5/7 CONT	3/7 3/7	1/MO 1/MO	1/YR 1/YR	1/YR 1/YR	1/YR 1/YR	1. 1.		<i>5/7</i> CONT	5/7 CONT
LIMITS: AVG.				1.70							20		
MAX. DATE	MG/D	DEG C	DEG C	2.00 GBTU/HR	6.0-9.0 SU	mg/l	mg/l	mg/l	5 mg/l	.06 mg/l	60 LB/D	DEG F	DEG F
1	45.1	5	23	0.507	7.7		***************************************					41.0	73.4
2	49.5	5	23	0.557	*******							41.0	73.4
3	51.4	7	24	0.546								44.6	75.2
4	52.2	7	24	0.554	7.6	***********						44.6	75.2
5	43.1	7	23	0.431					***********			44.6	73.4
6	49.0	7	24	0.520	7.9							44.6	75.2
7	33.8	7	25	0.380						0	0	44.6	77.0
8	47.1	7	25	0.530	7.9							44.6	77.0
9	39.4	7	25	0.443						***************************************		44.6	77.0
10	41.3	8	26	0.464								46.4	78.8
11	41.2	10	27	0.438	7.7							50.0	80.6
12 13	40.3	10	28	0.453								50.0	82.4
14	47.8 47.8	10	28	0.538	7.7	0.9				0	0	50.0	82.4
15	47.8 47.8	10 10	28 27	0.538	7.0							50.0	82.4
16	47.8 48.7	9	2 <i>1</i> 26	0.508	7.6							50.0	80.6
17	40.5	8	20 27	0.517 0.481		************						48.2	78.8
18	42.6	8	26	0.461	7.6							46.4	80.6
19	42.4	10	28	0.477	7.0				*******			46.4	78.8
20	38.1	8	25	0.405	7.6							50.0	82.4
21	35.9	8	25	0.381	7.0				***************************************	0	^	46.4	77.0
22	30.4	8	26	0.342	7.7					U	0	46.4	77.0
23	24.8	8	26	0.279						-	*********	46.4 46.4	78.8
24	19.4	8	26	0.218								46.4	78.8 78.8
25	20.0	10	28	0.225	7.6							40.4 50.0	76.6 82.4
26	19.0	10	28	0.214								50.0 50.0	82.4
27	54.0	10	28	0.607	7.5							50.0	82.4
28	55.3	9	27	0.622						0	0	48.2	80.6
29	56.0	9	24	0.525	7.9	**********						48.2	75.2
30	57.6	10	26	0.576								50.0	78.8
31			***************************************							***************************************	********		
AVERAGE	42.1	8	26	0.458	7.7	0.9				0	0	47.0	78.6
HIGHEST VAL.	57.6	10	28	0.622	7.9	0.9		-		0	0	50.0	82.4
LOWEST VAL.	19.0	5	23	0.214	7.5	0.9			-	Ö	ō	41.0	73.4
OVER LIMIT	0	o.		0	0	0				Ō	Ō	0	0
TOTAL	1261.5	\sim	• 10	00								_	-

CERTIFIED OPERATOR: David . Olombio. 14118

CERTIFIED OPERATOR: DAVID . Olombio. 14118

Exp. 6/30/2012

-MEANS NOT TESTED THIS DATE

5- 20-11

Tel. 219-473-5298

AUTHORIZED AGENT:

N.P.D

BP PRODUCTS NORTH AMERICA Inc., WHITING REFINERY 2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO. IN0000108

Apr-11

APRIL STORM WATER RUNOFF

----OUTFALL 003----

*** NOTE: TO BE SAMPLED AFTER EACH RAIN EVENT IF DISCHARGE OCCURS - ONCE PER WEEK

PARAMETER CODE: LIMITS:	MAX.	pH 00400 6-9	OIL 00552 15	TOC 00680 110	FLOW 50050
DATE	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	7.4 ————————————————————————————————————	15 mg/l 1.0 2.7 <0.3 <0.3	110 mg/l 26	MG/D 0.186 0.015 0.039 0.197 0.146 0.023 0.001 0.079 0.045 0.235 0.150 0.008 0.003 0.170 0.079 0.027 0.266 0.380 0.174 0.001 0.284 0.081 0.432 0.200 0.485 0.609 0.082
	29 30 31				0.013 0.022
AVERAGE	3.	7.5	<1.1	26	0.148
HIGHEST VAL. LOWEST VAL. OVER LIMIT	d C	7.7 7.4	2.7 <0.3 0 0	36 15 0	0.609 0.001 0
CERTIFIED ORER	ATOR ((Anna)	W. Oll	02	NO 44446

CERTIFIED OPERATOR: (CONO) Y. OSLA -MEANS NOT TESTED THIS DATE

NO. 14118 Exp. 6/30/2012 Tel. 219-473-5298

DATE: 5-20-11 AUTHORIZED AGENT:

BP PRODUCTS NORTH AMERICA Inc., WHITING REFINERY 2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO. IN0000108

Apr-11 APRIL STORM WATER RUNOFF

----OUTFALL 004----

*** NOTE: TO BE SAMPLED AFTER EACH RAIN EVENT IF DISCHARGE OCCURS - ONCE PER WEEK

PARAMETER CODE: LIMITS:	MAX.	pH 00400 6-9	OIL 00552 15	TOC 00680 110	FLOW 50050
DATE		SU	mg/l	mg/l	MG/D
	1			111g/1	0.272
	2				0.000
	3				0.006
	4	7.7	<0.3	12	0.131
	5			16-	0.131
	6				0.153
	7				0.342
	8				0.270
	9		-		0.002
	10				0.004
	11	8.0	3.0	18	0.187
	12				0.285
	13				0.253
	14				0.108
	15		*********	***************************************	0.011
	16				0.026
	17				0.006
	18	8.2	0.3*	23	0.186
	19	**********			0.474
	20				0.690
	21			***************************************	0.719
	22				0.249
	23		Milliannesse		0.021
	24	8.2	0.6*	14	0.370
	25				0.528
	26			**********	0.921
	27				1.245
	28				1.888
	29	***************************************		-	0.464
	30				0.000
	31			***********	
AVERAGE		8.0	<1.1*	17	0.335
HIGHEST VAL.		8.2	3.0	23	1.888
LOWEST VAL.		7.7	<0.3	12	0.000
OVER LIMIT		$ \bigcirc $,	0 0	. 0	0.000
CERTIFIED OPER	ATOR:	Yagid	0.00	en	

* MEANS NOT QUANTIFIABLE

NO. 14118 Exp. 6/30/2012 Tel. 219-473-5298 DATE: 5-20-11 AUTHORIZED AGENT:

BP PRODUCTS NORTH AMERICA Inc., WHITING REFINERY 2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT	NO INOO	0108 O	UTFALL	005	Apr-11	APRIL	PROCES	S WATER	R EFFLUEN	T					
PARAMETER FLOW BO			BOD	. (COD	pH TS		TSS OIL 00530 00552		NH3-N		SULFIDE			
CODE 50050 00310 SAMPLE TYPE			0310	81017		00400	00			00552		00610		00745	
PERMIT CONT				24		24		24		GRAB		24		24	
	ACTUAL		24		24		GRAB GRAB	24		GRAB		24		24 24	
FREQUE	NOV														- •
FREQUE	PERMIT	CONT		1/7		1/7	3/7		2/7		. 177		_		_
ACTUAL		CONT		1/7	1/7		3/7	As Required		1/7 1/7		5/7 5/7		1/7 1/7	
LIMITS:	AVG			4161		30323			4005		4000			•	
	MAX			8164		58427	6.0-9.0		4925 7723		1368 2600		1584 3572		23.1 51.4
DATI	E	MG/D	mg/l	LB/D	mg/l	LB/D	SU	mg/l	LB/D	mg/l	LB/D	mg/l	LB/D	mg/l	LB/D
	4	40.4						_		•					
	1 2	13.4 15.1					7.0								
	3	15.1								********	*********				
	4	16.8					6.9	10.4	1457			0.25 0.25	31 35	-O 01	
	5	19.2			42	6725			1707			0.25	40	<0.01	<1.4
	6	18.8	2.3	361	·		7.1			3.4	533	0.19	30		
	7	17.9						10.0	1493			0.13	19		
	8	19.3				*********	7.3				-				
	9	19.3											*********		
	10 11	19.0 18.9	4.5	713	52	8240		19.0	3011			<0.10	<16	<0.01	<1.6
	12	19.4	4.9	793	60	0700	7.0	10.0	1576	0.4*	63	<0.10	<16		
	13	18.7	4.5	193	00	9708	7.0	19.6	3171			<0.10	<16	<0.01	<1.6
	14	15.9	5.6	743	78	10343	7.0	26.0	3448	2.2	343	0.11	17	-0.04	
	15	17.5				10070	7.1	20.0	3440	1.8	263	<0.10	<13	<0.01	<1.3
	16	18.6								1.0	203		************	********	
	17	18.5										0.19	29		
	18	17.7					6.9	25.6	3779			0.14	21	<0.01	<1.5
	19	20.7			71	12257						<0.10	<17		-1.0
	20	19.4	8.0	1294			7.1			3.2	518	<0.10	<16		
	21	12.5						154.0	16055			<0.10	<10		
	22 23	16.6					7.2	73.8	10217			3.27	453		
	23 24	15.3 16.1			***************************************			109.0	13909						
	25	15.7					7.2	62.0	8325			0.11	15		
	26	18.4			265	40666	1.2	108.5 362.7	14207 55658			<0.10	<13	<0.01	<1.3
	27	18.2	93.0	14116			7.1	437.2	66362	21.5	3263	<0.10 <0.10	<15		
	28	16.0	52.0	6939				201.6	26902	3.7	494	<0.10	<15 <13		
	29	12.2	13.4	1363			7.3	61.0	6207			-0.10	~13		
	30	9.7						64.0	5177				***************************************		
	31														
AVERAGE	Ē	17.0	23.0	3290	95	14657	7.1	103.2	14174	5.2*	782	<0.28	<40	<0.01	<1.4
HIGHEST		20.7	93.0	14116	265	40666	7.3	437.2	66362	21.5	3263	3.27	453	<0.01	~ 4 @
LOWEST		9.7	2.3	361	42	6725	6.9	10.0	1457	0.4*	63	<0.10	403 <10	<0.01	<1.6 <1.3
OVER LIN	AIT	0	0	1	0	0	0	0	9	0	1	0.10	0	0.01	\1.3 0
TOTAL		509.80		0							-	-	_	-	•

CERTIFIEI CERTIFIED OPERATOR: WOW
--MEANS N--MEANS NOT TESTED THIS DATE
* MEANS NOT QUANTIFIABLE

NO. 14118 Exp. 6/30/2012 Tel. 219-473-5298

DATE: 5-20-1) AUTHORIZED AGENT:

2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO INC PARAMETER CODE SAMPLE TYPE	Apr-11 TL.CHRM 01034/01118		APRIL PROCESS PHENOL 32730		WATER EFFLUENT VANADIUM 01128		ORTHO-P 00665		MERCURY 71901				
PERMI	PERMIT GRAB ACTUAL GRAB			24 24		24 24		24 24		24 24		GRAB GRAB	
FREQUENCY													
PERMI ACTUA		1/7 1/7		1/7 1/7		1/7 1/7		1/MO 1/MO		1/7 1/7		2/YR 2/YR	
LIMITS: AVG. MAX. DATE	mg/l	2.01 4.48 LB/D	mg/l	23.90 68.53 LB/D	mg/l	20.33 73.01 LB/D	mg/l	LB/D	1 mg/l	LB/D	ng/L	LB/D	
1 2 3		Aridadan panggap						**************************************					
4 5	***************************************				<0.01	<1.40							
6 7 8	<0.005 	<0.8 	<0.01	<1.6					0.02	3			
9 10 11	<0.005	<0.8	<0.01	<1.6	<0.01	<1.58	0.042	6.7	0.01	2			
12 13	<0.005	<0.8	<0.01	<1.6	<0.01	<1.62	0.078	13	0.03	5	7.21 40.4	0.00114 0.00629	
14 15 16	<0.005	<0.7	<0.01	<1.3	<0.01 	<1.33	0.19	25	0.05	7	13.3	0.00194	
17 18 19					<0.01	<1.48		***********					
20 21	<0.005	<0.8	<0.01	<1.6					0.05	5			
22 23 24									***************************************				
25 26 27	<0.005	<0.8	<0.01	<1.5	<0.01	<1.31							
28 29 30									0.10	13			
31						***********			-		********		
AVERAGE	<0.005	<0.8	<0.01	<1.5	<0.01	<1.45	0.10	15	0.04	6	20.3	0.00312	
HIGHEST VAL. LOWEST VAL. OVER LIMIT	<0.005 <0.005 0	<0.8 <0.7 0	<0.01 <0.01 0	<1.6 <1.3 0	<0.01 <0.01 0	<1.62 <1.31 0	0.19 0.042 0	25 6.7 0	0.10 0.01 0	13 2 0	40.4 7.20 0	0.00629 0.00114 0	

CERTIFIED OPERATOR: David J. Olon NO. 141 -MEANS NOT TESTED THIS DATE

NO. 14118 Exp. 6/30/2012 Tel. 219-473-5298

DATE: 5-20-11

AUTHORIZED AGENT: